

## Application Data Sheet

### Application Information

Application number::	Unassigned
Filing Date::	31 March 2006
Application Type::	Regular
Subject Matter::	Utility
Title::	NEUROPROTECTIVE EFFECTS OF GLY-PRO-GLU FOLLOWING INTRAVENOUS INFUSION
Attorney Docket Number::	NRNZ-01052US3
Suggested Drawing Figure::	5A
Total Drawing Sheets::	9
Small Entity?::	Yes

### Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	New Zealand
Status::	Full Capacity
Given Name::	Jian
Family Name::	Guan
City of Residence::	Auckland
Country of Residence::	New Zealand
Street of mailing address::	29 Arran Street
Postal Address Line Two::	Avondale
City of mailing address::	Auckland
Country of mailing address::	New Zealand

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** Australia  
**Status::** Full Capacity  
**Given Name::** Gregory  
**Middle Name::** Brian  
**Family Name::** Thomas  
**City of Residence::** Western Australia  
**Country of Residence::** New Zealand  
**Street of mailing address::** 24B Florian Place  
**Postal Address Line Two::** Duncraig, Perth  
**City of mailing address::** Western Australia  
**Country of mailing address::** Australia  
**Postal or Zip Code of mailing address::** 6023

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** New Zealand  
**Status::** Full Capacity  
**Given Name::** David  
**Middle Name::** Charles  
**Family Name::** Batchelor  
**City of Residence::** Auckland  
**Country of Residence::** New Zealand  
**Street of mailing address::** 57 Gosford Drive  
**Postal Address Line Two::** Howick  
**City of mailing address::** Auckland  
**Country of mailing address::** New Zealand

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** New Zealand  
**Status::** Full Capacity  
**Given Name::** Peter  
**Middle Name::** David  
**Family Name::** Gluckman  
**City of Residence::** Auckland  
**Country of Residence::** New Zealand  
**Street of mailing address::** 78 Lucerne Road  
**Postal Address Line Two::** Remuera  
**City of mailing address::** Auckland  
**Country of mailing address::** New Zealand

### **Correspondence Information**

**Correspondence Customer Number::** 23910  
**Phone number::** (415) 362-3800  
**Fax Number::** (415) 362-2928  
**Email address::** officeactions@fdml.com

### **Representative Information**

**Representative Customer Number::** 23910

## Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/US2004/035165	22 October 2004
PCT/US2004/035165	<i>An application claiming the benefit under 35 USC 119(e)</i>	60/513,851	23 October 2003
PCT/US2004/035165	<i>An application claiming the benefit under 35 USC 119(e)</i>	60/515,397	28 October 2003
PCT/US2004/035165	<i>An application claiming the benefit under 35 USC 119(e)</i>	60/553,688	16 March 2004

## Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

## Assignee Information

<b>Assignee Name::</b>	NEUREN PHARMACEUTICALS LIMITED
<b>Street of mailing address::</b>	Level 3, 2-6 Park Avenue
<b>Postal Address Line Two::</b>	Grafton
<b>City of mailing address::</b>	Auckland
<b>Country of mailing address::</b>	New Zealand